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Center for Physical Therapy Services, Inc. reserves the right to deduct from ones invoice based on: (1) Notes that are late greater than 7 Calendar Days; (2) Incomplete Notes; (3) Notes that do not comply with the therapy frequency; (4) Notes that are returned to our office from the respective home health agencies. Ensure that you have all of your credentials up to date, otherwise payments may be delayed.

<u>D</u> = Discharge without Visit

R = Re-Evaluation (30 Days or 13th Visit or 19th Visit)

T = Treatment

D = Discharge

Total Tx's: ____ X Tx Rate:

Total Due: